Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF PENNSYLVANIA		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Todd First name R. Middle name Hall Last name and Suffix (Sr., Jr., II, III)	Kathleen First name N. Middle name Hall Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1427	xxx-xx-9931

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	1975 Daybreak Circle	If Debtor 2 lives at a different address:
		Harrisburg, PA 17110 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Dauphin	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

	otor 2	Kathleen N. Hall					Case number (if known)	
Par	t 2:	Tell the Court About	our Bank	ruptcy C	ase			
7.	Bank	chapter of the				f each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filin e box.	g for Bankruptcy
	cnoc	sing to file under	☐ Chapt	ter 7				
			☐ Chapt	ter 11				
			☐ Chapt	ter 12				
			■ Chapt	ter 13				
8.	How	you will pay the fee	abo ord	out how your er. If your	ou may pay. Typic	cally, if you are paying the fee yo	k with the clerk's office in your local co burself, you may pay with cash, cashie alf, your attorney may pay with a credit	r's check, or money
							on, sign and attach the Application for	Individuals to Pay
				•		(Official Form 103A). /ed (You may request this option	n only if you are filing for Chapter 7. By	/ law. a judge mav.
			but	is not rec	quired to, waive yo	our fee, and may do so only if yo	our income is less than 150% of the offi	icial poverty line that
							n installments). If you choose this optic cial Form 103B) and file it with your pet	
9.		you filed for ruptcy within the	■ No.					
		B years?	☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.	Are a	any bankruptcy	-					
	case	s pending or being	■ No					
	not f you,	by a spouse who is iling this case with or by a business ner, or by an ate?	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your	■ No.	Go to	line 12.			
	resid	lence?	☐ Yes.	Has vo	our landlord obtair	ned an eviction judgment agains	et you?	
			00.		No. Go to line 12	, 0	•	
						al Statement About an Eviction	Judgment Against You (Form 101A) ar	nd file it as part of

	tor 1 Todd R. Hall tor 2 Kathleen N. Hall			Case number (if known)
Por	2. Poport About Apy Pu	oinoccoc	Vou Own on a Sala Branzi	inter
Pari	Are you a sole proprietor	511162262	You Own as a Sole Propri	etor
12.	of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	usiness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if an	y
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, St	ate & ZIP Code
	it to this petition.		• • •	pox to describe your business:
				siness (as defined in 11 U.S.C. § 101(27A))
				al Estate (as defined in 11 U.S.C. § 101(51B))
				defined in 11 U.S.C. § 101(53A))
			☐ Commodity Brol	ker (as defined in 11 U.S.C. § 101(6))
				ve
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you indicate that you are	e court must know whether you are a small business debtor so that it can set appropriate e a small business debtor, you must attach your most recent balance sheet, statement of dederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Cha	apter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapte	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	y Hazardous Property or A	ny Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.		
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

Debtor 1 Todd R. Hall Kathleen N. Hall Debtor 2

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor 1 tor 2	Todd R. Hall Kathleen N. Hall				Case nu	umber (if known)	
Pari	t 6:	Answer These Questi	ons for Re	eporting Purposes				
16.		t kind of debts do have?	16a.	Are your debts primarily consult individual primarily for a personal,			e defined in 11 U.S.C	. § 101(8) as "incurred by an
				□ No. Go to line 16b.				
			4.Ch	Yes. Go to line 17.	aa dahtaO D'		lab ta that was Saassan	die abieta
			16b.	Are your debts primarily busine money for a business or investme				
				☐ No. Go to line 16c.				
				☐ Yes. Go to line 17.				
			16c.	State the type of debts you owe th	nat are not consur	mer debts or bus	siness debts	
17.		ou filing under oter 7?	■ No.	I am not filing under Chapter 7. Go	o to line 18.			
	after	ou estimate that any exempt erty is excluded and	☐ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be available	ou estimate that at le to distribute to	fter any exempt unsecured credi	property is excluded itors?	and administrative expenses
	admi	inistrative expenses paid that funds will		□ No				
	be av	vailable for ibution to unsecured itors?		Yes				
18.		many Creditors do	1 -49		1 ,000-5,000	ı	□ 25,001	
	you o	estimate that you ?	□ 50-99		☐ 5001-10,000		☐ 50,001	
			☐ 100-19 ☐ 200-99		□ 10,001-25,0	00	☐ More ti	han100,000
19.		much do you	□ \$0 - \$5	50,000	□ \$1,000,001	- \$10 million	□ \$500,0	000,001 - \$1 billion
		nate your assets to orth?		01 - \$100,000	□ \$10,000,001 □ \$50,000,001			0,000,001 - \$10 billion 00,000,001 - \$50 billion
				001 - \$500,000 001 - \$1 million)1 - \$500 million		han \$50 billion
20.		much do you	□ \$0 - \$5	50,000	□ \$1,000,001	- \$10 million	□ \$500,0	000,001 - \$1 billion
	to be	nate your liabilities e?	' '	01 - \$100,000 001 - \$500,000	□ \$10,000,001 □ \$50,000,001	·	_ ` ′	0,000,001 - \$10 billion 00,000,001 - \$50 billion
				001 - \$300,000 001 - \$1 million)1 - \$500 million		than \$50 billion
Par	t 7 :	Sign Below						
For	you		I have exa	amined this petition, and I declare	under penalty of p	perjury that the i	information provided	is true and correct.
				chosen to file under Chapter 7, I an ates Code. I understand the relief a				
				ney represents me and I did not pa t, I have obtained and read the not				help me fill out this
			I request	relief in accordance with the chapte	er of title 11, Unite	ed States Code,	, specified in this peti	ition.
				and making a false statement, conc cy case can result in fines up to \$29				
			/s/ Todd	R. Hall		/s/ Kathleen		
			Todd R. Signature	Hall of Debtor 1		Kathleen N. Signature of D		
			Executed	on May 21, 2019		Executed on	May 21, 2019	
				MM / DD / YYYY			MM / DD / YYYY	

Debtor 1	Todd R. Hall		
Debtor 2	Kathleen N. Hall	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Craig A. Diehl, Esquire	Date	May 21, 2019	
Signature of Attorney for Debtor		MM / DD / YYYY	
Craig A. Diehl, Esquire			
Printed name			
Law Offices of Craig A. Diehl			
Firm name			
3464 Trindle Road			
Camp Hill, PA 17011			
Number, Street, City, State & ZIP Code			
Contact phone (717) 763-7613	Email address		
52801 PA			
Bar number & State			

Fill in this infor	rmation to identify your	case:				
Debtor 1	Todd R. Hall First Name	Middle Name	Last Name	_		
Debtor 2	Kathleen N. Hall	Wildlie Name	Last Name			
(Spouse if, filing)	First Name	Middle Name	Last Name	-		
United States B	ankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA	_		
Case number (if known)						c if this is an ded filing
Summary			nd Certain Statistical Inform			12/15
information. Fill your original for	l out all of your schedule	es first; then complete th	e are filing together, both are equally res ne information on this form. If you are fi k the box at the top of this page.			
Fait I. Suilli	Harize Tour Assets				Your a	ssets of what you own
1. Schedule 1a. Copy li	A/B: Property (Official Fonds 55, Total real estate, for	orm 106A/B) om Schedule A/B			\$	170,000.00
1b. Copy li	ne 62, Total personal prop	perty, from Schedule A/B			\$	138,999.57
1c. Copy li	ne 63, Total of all property	on Schedule A/B			\$	308,999.57
Part 2: Sumr	narize Your Liabilities					
						abilities t you owe
		aims Secured by Property nn A, Amount of claim, at t	(Official Form 106D) the bottom of the last page of Part 1 of Sc.	hedule D	\$	145,025.34
		Unsecured Claims (Official 1 (priority unsecured claim	I Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>		\$	20,732.00
3b. Copy t	the total claims from Part	2 (nonpriority unsecured cl	laims) from line 6j of Schedule E/F		\$	349,426.49
			Your tota	al liabilities	\$	515,183.83
Part 3: Sumr	marize Your Income and	Expenses				
	: Your Income (Official Fo) I		\$	9,574.00
5. Schedule Copy your	J: Your Expenses (Official monthly expenses from li	Form 106J) ne 22c of <i>Schedule J</i>			\$	6,668.03
Part 4: Answ	ver These Questions for	Administrative and Stati	stical Records			
-		er Chapters 7, 11, or 13? on this part of the form. Ch	heck this box and submit this form to the c	court with you	ır other scl	nedules.
■ Yes						

7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

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page 1 of 2

Best Case Bankruptcy

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

17,885.00

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	20,732.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	219,506.16
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	240,238.16

	information to identify you	ii Gase allu Illis	s IIIIIg				
Debtor 1	Todd R. Hall	10.10					
Debtor 2	First Name Kathleen N. Hall	Middle N	vame	Last Name			
Spouse, if fili		Middle N	Name	Last Name			
Jnited Sta	ates Bankruptcy Court for the:	MIDDLE DIS	STRICT	T OF PENNSYLVANIA			
Case num	her						☐ Check if this is a
Jase Halli							amended filing
_	<u> Form 106A/B</u> dule A/B: Pro	nertv					12/15
formation nswer eve	. If more space is needed, attac ry question.	ch a separate she	eet to th	married people are filing together, both a nis form. On the top of any additional pag Estate You Own or Have an Interest In			
Yes.	Where is the property?						
	Where is the property?		What	is the property? Check all that apply			
.1	Where is the property? Daybreak Circle		What	is the property? Check all that apply Single-family home	Do not de	educt secured cla	aims or exemptions. Put
.1 _ 1975	,	on .	What ■ □		the amou	nt of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i> ms Secured by Property.
.1 1975 Street	5 Daybreak Circle address, if available, or other description	7110-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current ventire pro	nt of any secured Who Have Clain value of the operty?	d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
.1 1975 Street	5 Daybreak Circle address, if available, or other description			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current ventire prosperition (such as	walue of the operty? 170,000.00 the nature of y fee simple, tens	d claims on Schedule D: ms Secured by Property. Current value of the
.1 1975 Street:	5 Daybreak Circle address, if available, or other description risburg PA 17	7110-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current ventire prosperition (such as	walue of the operty? 170,000.00 the nature of y fee simple, tensate), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$170,000.0
.1 1975 Street:	5 Daybreak Circle address, if available, or other description isburg PA 17 State	7110-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current ventire prosper size (such as a life est:	walue of the operty? 170,000.00 the nature of y fee simple, tensate), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$170,000.0
.1 1975 Street	5 Daybreak Circle address, if available, or other description isburg PA 17 State	7110-0000	Who h	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current ventire prosper single control of the contr	rate of the operty? 170,000.00 the nature of y fee simple, tenate), if known. mple ck if this is commistructions)	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$170,000.0
1.1 1975 Street:	5 Daybreak Circle address, if available, or other description isburg PA 17 State	7110-0000	Who h	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Information you wish to add about this in	Current ventire prosper single control of the contr	rate of the operty? 170,000.00 the nature of y fee simple, tenate), if known. mple ck if this is commistructions)	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$170,000.0 rour ownership interest ancy by the entireties, of

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debtor 1 Debtor 2	Todd R. Hall Kathleen N. Hall		Case number (if known)	
. Cars, va	ans, trucks, tractors, sport utility ve	ehicles, motorcycles		
□ No				
■ Yes				
■ Yes				
3.1 Mak	ke: Ford	Who has an interest in the property? Check one	Do not deduct secured cl the amount of any secure	
Mod	del: Explorer	☐ Debtor 1 only	Creditors Who Have Clair	
Yea		☐ Debtor 2 only	Current value of the	Current value of the
App	roximate mileage: 165,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
1	er information:	\square At least one of the debtors and another		
Faiı	r Condition	Check if this is community property (see instructions)	\$5,000.00	\$5,000.00
		(**************************************		
3.2 Mak	ODV	Who has an interest in the property? Check one	Do not deduct secured cl the amount of any secure	ed claims on Schedule D:
Mod Yea		Debtor 1 only	Creditors Who Have Clair	ms Securea by Property.
	proximate mileage: 157,000	Debtor 2 only	Current value of the	Current value of the portion you own?
• • • • • • • • • • • • • • • • • • • •	er information:	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	entire property?	portion you own?
	or Condition	At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$900.00	\$900.00
3.3 Mak	ce: Chevrolet	Who has an interest in the property? Check one	Do not deduct secured cl the amount of any secure	
Mod	del: Silverado	☐ Debtor 1 only	Creditors Who Have Clai	
Year	r: 2003	☐ Debtor 2 only	Current value of the	Current value of the
App	roximate mileage: 186,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Othe	er information:	☐ At least one of the debtors and another		
Poo	or Condition	☐ Check if this is community property (see instructions)	\$800.00	\$800.00
		nd other recreational vehicles, other vehicles, a atercraft, fishing vessels, snowmobiles, motorcycle		
■ No				
☐ Yes				
	· · · · · · · · · · · · · · · · · · ·	vn for all of your entries from Part 2, including a that number here	-	\$6,700.00
	escribe Your Personal and Household I			
Do you ov	wn or have any legal or equitable ir	terest in any of the following items?	}	Current value of the portion you own? Do not deduct secured claims or exemptions.
	nold goods and furnishings les: Major appliances, furniture, linens	s, china, kitchenware		
■ Yes.	Describe			

Debtor 1 Debtor 2	Kathleen N.		Case number (if known)	
		Master Bedroom Set Two (2) Bedroom Sets Dining Room Set Washer and Dryer Living Room Set Assorted Wall Decor		\$5,000.00
□ No	es: Televisions ar	nd radios; audio, video, stereo, and digital equipment; computers, print phones, cameras, media players, games	ers, scanners; music collections	; electronic devices
		Two (2) Televisions Computer Two (2) Cell Phones Printer		\$2,500.00
Example No		figurines; paintings, prints, or other artwork; books, pictures, or other a ons, memorabilia, collectibles	rt objects; stamp, coin, or baseb	pall card collections;
Example No	ent for sports ar es: Sports, photog musical instru Describe	graphic, exercise, and other hobby equipment; bicycles, pool tables, g	olf clubs, skis; canoes and kayał	ks; carpentry tools;
■ No		s, shotguns, ammunition, and related equipment		
□ No		othes, furs, leather coats, designer wear, shoes, accessories		
		Casual Wearing Apparel		\$750.00
□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jev	elry, watches, gems, gold, silve	r
		Assorted Rings, Necklaces, Pins, and Earrings		\$2,500.00
Examp ■ No	rm animals oles: Dogs, cats, b	birds, horses		
14. Any otl ■ No		d household items you did not already list, including any health a	ids you did not list	

Debtor 1 Debtor 2	Todd R. Hall Kathleen N. Hall		Case number (if known)	
			rt 3, including any entries for pages you have attached	\$10,750.00
Part 4: De	escribe Your Financial Asset	ts		
Do you o	wn or have any legal or e	quitable interest in a	ny of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	ples: Money you have in y	•	ne, in a safe deposit box, and on hand when you file your petiti	on
			Cash	\$75.00
Exam		ve multiple accounts w	nts; certificates of deposit; shares in credit unions, brokerage with the same institution, list each. Institution name: First National Bank Account No. xxx6269	houses, and other similar
	17.2.	Credit Union	Members 1st Federal Credit Union Account No. xxx3951	\$215.98
Exam	s, mutual funds, or public ples: Bond funds, investm		erage firms, money market accounts ame:	\$24.00
		Coach Stock 3 Shares		\$108.99
joint v ■ No	venture Give specific information	about them		st in an LLC, partnership, and
20. Gover Nego Non-r	Na nment and corporate bo tiable instruments include pegotiable instruments are Give specific information	me of entity: nds and other negotion personal checks, cashion those you cannot trans	% of ownership: able and non-negotiable instruments iers' checks, promissory notes, and money orders. sfer to someone by signing or delivering them.	
Exam □ No -	List each account separa	SA, Keogh, 401(k), 400 tely.	3(b), thrift savings accounts, or other pension or profit-sharing	plans
	Туре	of account:	Institution name:	

claims or exemptions.

28. Tax refunds owed to you

■ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Official Form 106A/B

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Schedule A/B: Property

page 5

Best Case Bankruptcy

Debtor 1 Debtor 2	Todd R. Hall Kathleen N. Hall	Case number (if known)	
☐ Yes	s. Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
If you some	nterest in property that is due you from someone who has die u are the beneficiary of a living trust, expect proceeds from a life insect proceeds from a life insect proceeds.		eive property because
⊔ Yes	s. Give specific information		
Exan ■ No	ns against third parties, whether or not you have filed a lawsui mples: Accidents, employment disputes, insurance claims, or rights		
☐ Yes	s. Describe each claim		
■ No	r contingent and unliquidated claims of every nature, including s. Describe each claim	g counterclaims of the debtor and rights to	o set off claims
35. Any f ■ No	inancial assets you did not already list		
	s. Give specific information		
	I the dollar value of all of your entries from Part 4, including ar Part 4. Write that number here		\$121,549.57
Part 5: D	Describe Any Business-Related Property You Own or Have an Interest I	n. List any real estate in Part 1.	
37. Do yo ι	u own or have any legal or equitable interest in any business-related pr	operty?	
No. C	Go to Part 6.		
☐ Yes.	Go to line 38.		
	Describe Any Farm- and Commercial Fishing-Related Property You Owr you own or have an interest in farmland, list it in Part 1.	n or Have an Interest In.	
46. Do y o	ou own or have any legal or equitable interest in any farm- or c	commercial fishing-related property?	
■ No	o. Go to Part 7.		
☐ Ye	es. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did	Not List Above	
	ou have other property of any kind you did not already list? nples: Season tickets, country club membership		
■ No			
☐ Yes	s. Give specific information		

Debtor 1 Todd R. Hall
Debtor 2 Kathleen N. Hall

Case number (if known)

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$170,000.00
56.	Part 2: Total vehicles, line 5	\$6,700.00		
57.	Part 3: Total personal and household items, line 15	\$10,750.00		
58.	Part 4: Total financial assets, line 36	\$121,549.57		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$138,999.57	Copy personal property total	\$138,999.57
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$308,999.57

Official Form 106A/B Schedule A/B: Property page 7
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Best Case Bankruptcy

Fill in this infor	mation to identify your	case:		
Debtor 1	Todd R. Hall			
	First Name	Middle Name	Last Name	
Debtor 2	Kathleen N. Hall			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF	PENNSYLVANIA	
Case number				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.							
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)				
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	11 U.S.C. § 522(d)(1) 11 U.S.C. § 522(d)(5) 11 U.S.C. § 522(d)(2) 11 U.S.C. § 522(d)(2)			
	1975 Daybreak Circle Harrisburg, PA 17110 Dauphin County	\$170,000.00		\$50,300.00	11 U.S.C. § 522(d)(1)			
	Personal Residence Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit				
	1975 Daybreak Circle Harrisburg, PA 17110 Dauphin County	\$170,000.00		\$2,650.00	11 U.S.C. § 522(d)(5)			
	Personal Residence Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit				
	2013 Ford Explorer 165,000 miles	\$5,000.00		\$3,596.99	11 U.S.C. § 522(d)(2)			
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit				
	2004 Honda CRV 157,000 miles	\$900.00		\$900.00	11 U.S.C. § 522(d)(2)			
	Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Kathleen N. Hall Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Master Bedroom Set** 11 U.S.C. § 522(d)(3) \$5,000.00 \$5,000.00 Two (2) Bedroom Sets **Dining Room Set** 100% of fair market value, up to Washer and Dryer any applicable statutory limit **Living Room Set Assorted Wall Decor** Line from Schedule A/B: 6.1 Two (2) Televisions 11 U.S.C. § 522(d)(3) \$2,500.00 \$2,500.00 Computer Two (2) Cell Phones 100% of fair market value, up to **Printer** any applicable statutory limit Line from Schedule A/B: 7.1 **Casual Wearing Apparel** 11 U.S.C. § 522(d)(3) \$750.00 \$750.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Assorted Rings, Necklaces, Pins, and 11 U.S.C. § 522(d)(4) \$2,500.00 \$2,500.00 **Earrings** Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **Thrift Saving: Federal Government** 11 U.S.C. § 522(d)(12) \$33,465.66 \$27,107.52 **Thrift Savings Plan** Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 11 U.S.C. § 522(d)(12) 401(k): Alerus 401(k) \$86.863.78 \$54,733.66 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

Todd R. Hall

Debtor 1

Fill	in this inforn	nation to identify you	ır case:			
Deb	otor 1	Todd R. Hall				
		First Name	Middle Name Last Name		-	
Deb	otor 2	Kathleen N. Hal	I			
(Spo	use if, filing)	First Name	Middle Name Last Name			
Unit	ted States Bar	nkruptcy Court for the:	MIDDLE DISTRICT OF PENNSYLVANIA			
Cas	e number					
(if kn	_				☐ Check	if this is an
					amend	ded filing
Off	icial Form	n 106D				
Sc	hedule	D: Creditors	Who Have Claims Secure	d by Propert	٧	12/15
			W			W
s ne			If two married people are filing together, both are edout, number the entries, and attach it to this form. C			
1. Do	any creditors	have claims secured by	y your property?			
	□ No Check	this box and submit t	his form to the court with your other schedules. Y	ou have nothing else t	o report on this form	
	_		,	ou have houring older	o report our time form.	
		all of the information	DEIOW.			
Par	t 1: List Al	I Secured Claims		O-1 A	Column B	Column C
			more than one secured claim, list the creditor separately			
			s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
	Alerus Re	tirement and				
2.1	Benefits		Describe the property that secures the claim:	\$32,130.12	\$86,863.78	\$0.00
	Creditor's Name		401(k): Alerus 401(k)			
	201 East (Clark Street				
	P.O. Box		As of the date you file, the claim is: Check all that			
		a, MN 56007	apply. □ Contingent			
		City, State & Zip Code	☐ Unliquidated			
		ony, onato a zip ocao	☐ Disputed			
Who	o owes the de	bt? Check one.	Nature of lien. Check all that apply.			
	Debtor 1 only		■ An agreement you made (such as mortgage or se	cured		
_	Debtor 2 only		car loan)			
_	Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_		ne debtors and another	☐ Judgment lien from a lawsuit			
	Check if this cla	aim relates to a	☐ Other (including a right to offset)			

Official Form 106D

community debt

Date debt was incurred

Schedule D: Creditors Who Have Claims Secured by Property

Last 4 digits of account number

Debtor 1 Todd R. Hall	Case number (if known)					
First Name Middle N	ame Last Name					
Debtor 2 Kathleen N. Hall First Name Middle N	ame Last Name					
i list valle iviidule iv	and Last Hame					
2.2 Ford Credit	Describe the property that secures the claim:	\$1,403.01	\$5,000.00	\$0.00		
Creditor's Name	2013 Ford Explorer 165,000 miles					
	Fair Condition					
P.O. Box 790119 Saint Louis, MO	As of the date you file, the claim is: Check all that					
63179-0119	apply. □ Contingent					
Number, Street, City, State & Zip Code	☐ Unliquidated					
rambol, chool, only, challe a zip code	☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
☐ Debtor 1 only	■ An agreement you made (such as mortgage or see	cured				
Debtor 2 only	car loan)					
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)					
\square At least one of the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim relates to a	Other (including a right to offset)					
community debt						
Date debt was incurred 2013	Last 4 digits of account number 1581					
2.3 Home Point Financial	Describe the property that secures the claim:	\$105,134.07	\$170,000,00	\$0.00		
Creditor's Name	Describe the property that secures the claim: 1975 Daybreak Circle Harrisburg,	<u> </u>	\$170,000.00	φυ.υυ		
	PA 17110 Dauphin County					
P.O. Box 790309	Personal Residence					
Saint Louis, MO	As of the date you file, the claim is: Check all that					
63179-0309	apply. □ Contingent					
Number, Street, City, State & Zip Code	☐ Unliquidated					
, , , , , , , , , , , , , , , , , , ,	☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
☐ Debtor 1 only	■ An agreement you made (such as mortgage or see	cured				
☐ Debtor 2 only	car loan)					
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)					
\square At least one of the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim relates to a	Other (including a right to offset)					
community debt						
Date debt was incurred 2001	Last 4 digits of account number 0392					
2.4 Thrift Savings Plan Creditor's Name	Describe the property that secures the claim:	\$6,358.14	\$33,465.66	\$0.00		
Creditor's Name	Thrift Savings Plan					
	Thrift Savings Plan					
P.O. Box 385021	As of the date you file, the claim is: Check all that apply.					
Birmingham, AL 35238	□ Contingent					
Number, Street, City, State & Zip Code	☐ Unliquidated					
	☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
Debtor 1 only	■ An agreement you made (such as mortgage or see	cured				
Debtor 2 only	car loan)					
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)					
At least one of the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim relates to a community debt	Other (including a right to offset)					
-						
Date debt was incurred	Last 4 digits of account number					

\$145,025.34

Official Form 106D Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 3

Debtor 1	Todd R. Hall			Case number (if known)	
	First Name	Middle Name	Last Name		
Debtor 2	Kathleen N. Hall				
	First Name	Middle Name	Last Name		
Add the	dollar value of your en	tries in Column A or	this page. Write that number here):	
	the last page of your fo	orm, add the dollar v	alue totals from all pages.	\$145,025.3	34

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

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Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 3 of 3

Best Case Bankruptcy

Fill in this inform	mation to identify your c	ase:					
Debtor 1	Todd R. Hall						
	First Name	Middle Name	Last Nam	Э			
Debtor 2 (Spouse if, filing)	Kathleen N. Hall First Name	Middle Name	Last Nam	9			
United States Ba	inkruptcy Court for the:	MIDDLE DISTRICT OF F	PENNSYLVANIA	4			
Case number _						_	if this is an led filing
Be as complete an	d accurate as possible. Use tracts or unexpired leases to	ho Have Unsecu	RIORITY claims a Also list executo	nd Part 2 fo	s on Schedule A/B: F	Property (Official For	m 106A/B) and on
Schedule D: Credit	ors Who Have Claims Secuntinuation Page to this page	red Leases (Official Form 10 ired by Property. If more spa e. If you have no information	ace is needed, co	py the Part	you need, fill it out,	number the entries i	n the boxes on the
Part 1: List A	II of Your PRIORITY Uns	secured Claims					
1. Do any credite	ors have priority unsecured	l claims against you?					
☐ No. Go to F	Part 2.						
Yes.							
identify what ty possible, list th	pe of claim it is. If a claim has e claims in alphabetical orde	. If a creditor has more than or s both priority and nonpriority a r according to the creditor's na ticular claim, list the other cred	amounts, list that one me. If you have me.	claim here ar	nd show both priority a	and nonpriority amount	ts. As much as
(For an explan	ation of each type of claim, se	ee the instructions for this forn	n in the instruction	booklet.)			
					Total claim	Priority amount	Nonpriority amount
2.1 Interna	I Revenue Service	Last 4 digits of	account number		\$18,627.00	\$18,627.00	\$0.00
•	editor's Name ptcy Section	When was the d	lebt incurred?	2016		· ·	
P.O. Bo						-	
	treet City State Zip Code		ou file, the claim	is: Check a	II that apply		
Who incurre	d the debt? Check one.	☐ Contingent					
Debtor 1	only	☐ Unliquidated					
Debtor 2 of	only	☐ Disputed					
	and Debtor 2 only	•	TY unsecured cla	ıim:			
	ne of the debtors and another	□ Domestic sup	port obligations				
	this claim is for a commun	_	ertain other debts	ou owe the	government		
	subject to offset?	•			u were intoxicated		
■ No		Other. Specif	•	. , , 0			
□ Yes		□ Omer. specii	Federal Inc	como Tav	/AC		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 14

Debtor 1 Todd R. Hall Debtor 2 Kathleen N. Hall		Case nu	umber (if known)		
2.2 Internal Revenue Service	Last 4 digits of account number		\$2,105.00	\$2,105.00	\$0.00
Priority Creditor's Name Bankruptcy Section P.O. Box 7346	When was the debt incurred?	2017			
Philadelphia, PA 19101-7346					
Number Street City State Zip Code	As of the date you file, the claim	is: Check al	I that apply		
Who incurred the debt? Check one.	☐ Contingent				
Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	ıim:			
☐ At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the	government		
Is the claim subject to offset?	☐ Claims for death or personal inj	ury while you	u were intoxicated		
■ No	Other. Specify				
☐ Yes	Federal Inc	ome Tax	es		
Part 2: List All of Your NONPRIORITY Unsec 3. Do any creditors have nonpriority unsecured clair ☐ No. You have nothing to report in this part. Submit ☐ Yes.		schedules.			
3. Do any creditors have nonpriority unsecured clair No. You have nothing to report in this part. Submit	t this form to the court with your other states of the creditor claim. For each claim listed, identify when the creditor claim.	who holds e	aim it is. Do not list claims	s already included in Pans fill out the Continuation	rt 1. If more on Page of
 Do any creditors have nonpriority unsecured clair No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each othen one creditor holds a particular claim, list the other Part 2. 	e alphabetical order of the creditor claim. For each claim listed, identify where creditors in Part 3.If you have more to	who holds e nat type of cla han three no	aim it is. Do not list claims enpriority unsecured claim	s already included in Pa	rt 1. If more on Page of
 3. Do any creditors have nonpriority unsecured clair No. You have nothing to report in this part. Submit Yes. 4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. 4.1 Applied Bank 	t this form to the court with your other states of the creditor claim. For each claim listed, identify when the creditor claim.	who holds e nat type of cla han three no	aim it is. Do not list claims enpriority unsecured claim	s already included in Pans fill out the Continuation	rt 1. If more on Page of
 Do any creditors have nonpriority unsecured clair No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Applied Bank Nonpriority Creditor's Name P.O. Box 70165 	e alphabetical order of the creditor claim. For each claim listed, identify where creditors in Part 3.If you have more to	who holds e nat type of cla han three no	aim it is. Do not list claims onpriority unsecured claim	s already included in Pans fill out the Continuation	rt 1. If more on Page of
 Do any creditors have nonpriority unsecured clair No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. Applied Bank Nonpriority Creditor's Name 	e alphabetical order of the creditor claim. For each claim listed, identify wir creditors in Part 3.lf you have more to tast 4 digits of account number.	who holds en at type of clahan three no er 4762	aim it is. Do not list claims onpriority unsecured claim	s already included in Pans fill out the Continuation	rt 1. If more on Page of
 3. Do any creditors have nonpriority unsecured clair No. You have nothing to report in this part. Submit Yes. 4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2. 4.1 Applied Bank Nonpriority Creditor's Name P.O. Box 70165 Philadelphia, PA 19176-0165 	e alphabetical order of the creditor claim. For each claim listed, identify what creditors in Part 3.lf you have more to the Last 4 digits of account number when was the debt incurred?	who holds en at type of clahan three no er 4762	aim it is. Do not list claims onpriority unsecured claim	s already included in Pans fill out the Continuation	rt 1. If more on Page of
 Do any creditors have nonpriority unsecured clair	e alphabetical order of the creditor claim. For each claim listed, identify where creditors in Part 3.If you have more to the Last 4 digits of account number when was the debt incurred? As of the date you file, the cla	who holds en at type of clahan three no er 4762	aim it is. Do not list claims onpriority unsecured claim	s already included in Pans fill out the Continuation	rt 1. If more on Page of
 Do any creditors have nonpriority unsecured clair	e alphabetical order of the creditor claim. For each claim listed, identify where creditors in Part 3.If you have more to be a second to be a count number. Last 4 digits of account number. When was the debt incurred? As of the date you file, the claim count number.	who holds en at type of clahan three no er 4762	aim it is. Do not list claims onpriority unsecured claim	s already included in Pans fill out the Continuation	rt 1. If more on Page of
 3. Do any creditors have nonpriority unsecured clair ☐ No. You have nothing to report in this part. Submit ☐ Yes. 4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other part 2. 4.1 Applied Bank Nonpriority Creditor's Name P.O. Box 70165 Philadelphia, PA 19176-0165 Number Street City State Zip Code Who incurred the debt? Check one. ☐ Debtor 1 only 	e alphabetical order of the creditor claim. For each claim listed, identify what creditors in Part 3.If you have more to be also the creditors in Part 4 digits of account number. When was the debt incurred? As of the date you file, the claim contingent continues conti	who holds en at type of clahan three no er 4762	aim it is. Do not list claims onpriority unsecured claim	s already included in Pans fill out the Continuation	rt 1. If more on Page of
3. Do any creditors have nonpriority unsecured clair □ No. You have nothing to report in this part. Submit ■ Yes. 4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other part 2. 4.1 Applied Bank Nonpriority Creditor's Name P.O. Box 70165 Philadelphia, PA 19176-0165 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only ■ Debtor 1 and Debtor 2 only	e alphabetical order of the creditor claim. For each claim listed, identify what creditors in Part 3.If you have more to be also the creditors in Part 4 digits of account number. Last 4 digits of account number when was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed	who holds en type of class type of class than three no enterminate with the second sec	aim it is. Do not list claims onpriority unsecured claim	s already included in Pans fill out the Continuation	rt 1. If more on Page of
3. Do any creditors have nonpriority unsecured clair □ No. You have nothing to report in this part. Submit ■ Yes. 4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other part 2. 4.1 Applied Bank Nonpriority Creditor's Name P.O. Box 70165 Philadelphia, PA 19176-0165 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	e alphabetical order of the creditor claim. For each claim listed, identify what creditors in Part 3.If you have more to be also the creditors in Part 4 digits of account number. When was the debt incurred? As of the date you file, the claim contingent continues conti	who holds en type of class type of class than three no enterminate with the second sec	aim it is. Do not list claims onpriority unsecured claim	s already included in Pans fill out the Continuation	rt 1. If more on Page of
3. Do any creditors have nonpriority unsecured clair □ No. You have nothing to report in this part. Submit ■ Yes. 4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other part 2. 4.1 Applied Bank Nonpriority Creditor's Name P.O. Box 70165 Philadelphia, PA 19176-0165 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only ■ Debtor 1 and Debtor 2 only	e alphabetical order of the creditor claim. For each claim listed, identify where creditors in Part 3.If you have more to be a second to be a	who holds e nat type of cla han three no er 4762 2018 im is: Check	aim it is. Do not list claims onpriority unsecured claim c all that apply	s already included in Pa ns fill out the Continuation Total cla	rt 1. If more on Page of
3. Do any creditors have nonpriority unsecured clair □ No. You have nothing to report in this part. Submit ■ Yes. 4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other part 2. 4.1 Applied Bank Nonpriority Creditor's Name P.O. Box 70165 Philadelphia, PA 19176-0165 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	e alphabetical order of the creditor claim. For each claim listed, identify where creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 4.If you h	who holds e nat type of cla han three no er 4762 2018 im is: Check ured claim: eparation ag	aim it is. Do not list claims on priority unsecured claim call that apply	s already included in Pa ns fill out the Continuation Total cla	rt 1. If more on Page of
3. Do any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. 4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other part 2. 4.1 Applied Bank Nonpriority Creditor's Name P.O. Box 70165 Philadelphia, PA 19176-0165 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	t this form to the court with your other states to the creditor of the creditor claim. For each claim listed, identify where creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 4.If you ha	who holds e nat type of cla han three no er 4762 2018 im is: Check ured claim: eparation ag aring plans,	aim it is. Do not list claims on priority unsecured claim on priority unsecured claim on the content of all that apply greement or divorce that yeard other similar debts	s already included in Pa ns fill out the Continuation Total cla	rt 1. If more on Page of

or 1 Todd R. Hall or 2 Kathleen N. Hall		Case number (if known)	
Barclays	Last 4 digits of account number	7615	\$3,738.38
Nonpriority Creditor's Name P.O. Box 13337 Philadelphia, PA 19101-3337	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l alaim.	
At least one of the debtors and another	Student loans	a ciaim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	a plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card		
Barclays	Last 4 digits of account number	2076	\$5,065.53
Nonpriority Creditor's Name P.O. Box 13337	When was the debt incurred?	2018	ψ5,005.00
Philadelphia, PA 19101-3337 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	•		
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	Purchases	
Capital One	Last 4 digits of account number	7487	\$2,561.89
Nonpriority Creditor's Name P.O. Box 71083 Charlotte, NC 28272-1083	When was the debt incurred?	2018	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	l Purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

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	or 1 Todd R. Hall or 2 Kathleen N. Hall		Case number (if known)	
4.5	Capital One	Last 4 digits of account number	1467	\$1,064.08
	Nonpriority Creditor's Name P.O. Box 71083 Charlotte, NC 28272-1083	When was the debt incurred?	2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	\square Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	Purchases	
4.6	Capital One	Last 4 digits of account number	8128	\$1,598.96
	Nonpriority Creditor's Name P.O. Box 71083 Charlotte, NC 28272-1083	When was the debt incurred?	2018	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	• •	
	Yes	■ Other. Specify Credit Card	l Purchases	
4.7	Capital One	Last 4 digits of account number	2959	\$2,368.63
	Nonpriority Creditor's Name P.O. Box 71083 Charlotte, NC 28272-1083	When was the debt incurred?	2018	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	l Purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

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		.
Capital One Nonpriority Creditor's Name	Last 4 digits of account number 9717	\$7,769.30
P.O. Box 71083 Charlotte, NC 28272-1083	When was the debt incurred? 2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divor report as priority claims	orce that you did not
■ No	\square Debts to pension or profit-sharing plans, and other similar	ar debts
Yes	■ Other. Specify Credit Card Purchases	
Chase	Last 4 digits of account number 9815	\$2,169.26
Nonpriority Creditor's Name P.O. Box 1423 Charlotte, NC 28201-1423	When was the debt incurred? 2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or diversity claims	orce that you did not
■ No	Debts to pension or profit-sharing plans, and other similar	ar debts
Yes	■ Other. Specify Credit Card Purchases	
Chase	Last 4 digits of account number 5827	\$6,220.93
Nonpriority Creditor's Name		
P.O. Box 1423	When was the debt incurred? 2018	
Charlotte, NC 28201-1423 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or diverseport as priority claims	orce that you did not
■ No	Debts to pension or profit-sharing plans, and other similar	ar debts
☐ Yes	■ Other. Specify Credit Card Purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

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or 2 Kathleen N. Hall		Case number (if known)	
Chase	Last 4 digits of account number	9917	\$9,523.23
Nonpriority Creditor's Name P.O. Box 1423	When was the debt incurred?	2018	
Charlotte, NC 28201-1423	- As a fall of later of the all of the later		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	<u></u>	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes			
☐ Yes	Other. Specify Credit Card	a Fulcilases	
Citi Cards	Last 4 digits of account number	8158	\$1,919.23
Nonpriority Creditor's Name P.O. Box 70166 Philadelphia, PA 19176-0166	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	d Purchases	
Citi Cards	Last 4 digits of account number		\$7,077.52
Nonpriority Creditor's Name P.O. Box 70166 Philadelphia, PA 19176-0166	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Credit Card	l Purchases	

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tor 2 Kathleen N. Hall		Case number (if known)	
Citi Cards	Last 4 digits of account number	4488	\$4,979.4
Nonpriority Creditor's Name P.O. Box 70166	When was the debt incurred?	2018	
Philadelphia, PA 19176-0166			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only			
•	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
☐ At least one of the debtors and another	Student loans	u ciaini.	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	☐ Debts to pension or profit-sharing		
Yes	Other. Specify Credit Card	d Purchases	
Comenity Bank	Last 4 digits of account number	1197	\$3,240.5
Nonpriority Creditor's Name P.O. Box 659813	When was the debt incurred?	2018	
San Antonio, TX 78265-9113 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	-		
Debtor 1 only	Contingent		
<u> </u>	Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed	Labeta	
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	DObligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Credit Card	d Purchases	
Comenity Bank	Last 4 digits of account number	8540	\$1,024.4
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ1,02-11-
P.O. Box 659728 San Antonio, TX 78265-9728	When was the debt incurred?	2018	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•		
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	·	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	d Purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

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Credit One Bank	Last 4 digits of account number	4032	\$2,594.9
Nonpriority Creditor's Name P.O. Box 60500	When was the debt incurred?	2018	
City of Industry, CA 91716-0500			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only			
,	Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	l Purchases	
Discover	Last 4 digits of account number	0337	\$1,786.7
Nonpriority Creditor's Name	When we the debt incomed?	2019	
P.O. Box 6103 Carol Stream, IL 60197-6103	When was the debt incurred?	2018	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card		
First Bankcard	Last 4 digits of account number	3628	\$2,531.2
Nonpriority Creditor's Name P.O. Box 2557	When was the debt incurred?	2018	
Omaha, NE 68103-2557			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
\square Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	and an and other similar 111	
No	☐ Debts to pension or profit-sharin		
☐ Yes	■ Other. Specify Credit Card	l Purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

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Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i	2018	\$430.00
	2018	
As of the date you file, the claim i		
	s: Check all that apply	
☐ Contingent		
☐ Unliquidated		
☐ Disputed		
	d claim:	
☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
· ·	• •	
Other. Specify Credit Card	l Purchases	
Last 4 digits of account number	0810	\$751.5 ⁻
When was the debt incurred?	2018	
As of the date you file, the claim i	s: Check all that apply	
Contingent		
`		
•	1 claim:	
_	denni.	
☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	g plans, and other similar debts	
Other. Specify Credit Card	Purchases	
Last 4 digits of account number		\$27,339.7
		. ,
When was the debt incurred?	2014-2015	
As of the date you file, the claim i	s: Check all that apply	
☐ Contingent		
☐ Unliquidated		
☐ Disputed		
<u></u> '	d claim:	
☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
<u></u>	g plans, and other similar debts	
· ·	• •	
	□ Disputed Type of NONPRIORITY unsecured □ Student loans □ Obligations arising out of a separeport as priority claims □ Debts to pension or profit-sharin ■ Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim in the	Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Purchases

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Lending CLub	Last 4 digits of account number	3848	\$13,724.22
Nonpriority Creditor's Name 595 Market Street, Ste 200 San Francisco, CA 94105	When was the debt incurred?	2018	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	l Purchases	
Macy's	Last 4 digits of account number	2725	\$3,831.1
Nonpriority Creditor's Name P.O. Box 78008 Pheonix, AZ 85062-8008	When was the debt incurred?	2018	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debts	
No	·		
☐ Yes	Other. Specify Credit Card	1 Purchases	
Navient Solutions	Last 4 digits of account number	0314	\$218,791.2
Nonpriority Creditor's Name P.O. Box 9500 Wilkes Barre, PA 18773-9500	When was the debt incurred?	2010	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	Пол		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another		u Olaiiii.	
	 Student loans 		
☐ Check if this claim is for a community			
☐ Check if this claim is for a community debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
debt		,	

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Paypal	Last 4 digits of account number	3976	\$3,624.93
Nonpriority Creditor's Name Paypal Credit Services P.O. Box 960080	When was the debt incurred?	2018	
Orlando, FL 32896-0080 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card	I Purchases	
Sears	Last 4 digits of account number	4284	\$3,503.34
Nonpriority Creditor's Name P.O. Box 9001055	When was the debt incurred?	2018	•
Louisville, KY 40290-1055 Number Street City State Zip Code	As of the date you file, the claim i	is: Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim i	5. Спеск ан шасарру	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card	I Purchases	
Synchrony Bank	Last 4 digits of account number	7620	\$2,825.80
Nonpriority Creditor's Name P.O. Box 960013	When was the debt incurred?	2018	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Orlando, FL 32896-0013 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	Пол		
Debtor 2 only	☐ Contingent		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
<u> </u>	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
•	<u></u>		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 11 of 14

2 Kathleen N. Hall		Case number (if known)	
Synchrony Bank	Last 4 digits of account number	5438	\$138.18
Nonpriority Creditor's Name P.O. Box 960013	When was the debt incurred?	2018	
Orlando, FL 32896-0013 Number Street City State Zip Code		in Charle all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim	is. Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only			
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	☐ Student loans	a Gain.	
☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	,	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	d Purchases	
Talbots	Last 4 digits of account number	3044	\$2,673.32
Nonpriority Creditor's Name P.O. Box 659617 San Antonio, TX 78265-9617	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	d Purchases	
TD Book N A		5070	¢2.450.0
TD Bank, N.A. Nonpriority Creditor's Name	Last 4 digits of account number	5070	\$2,150.9
P.O. Box 100290 Columbia, SC 29202-3290	When was the debt incurred?	2018	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	■ Other Specify Credit Card		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 12 of 14

Debtor Debtor	1 Todd R. Hall 12 Kathleen N. Hall		Case number (if known)	
4.3	Total Visa	Last 4 digits of account number	8160	\$84.77
	Nonpriority Creditor's Name P.O. Box 5220 Sioux Falls, SD 57117-5220	When was the debt incurred?	2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	I Purchases	
4.3	Tuskegee University	Last 4 digits of account number	4555	\$714.96
	Nonpriority Creditor's Name Kresje Ctr, Room 108 1st Floor Tuskegee Institute, AL 36088	When was the debt incurred?	1987	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	■ Debtor 1 only	Contingent		
	☐ Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	Lateta	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Student Lo	an	
4.3	Wells Fargo Nonpriority Creditor's Name	Last 4 digits of account number	9907	\$1,165.68
	P.O. Box 71118 Charlotte, NC 28272-1118	When was the debt incurred?	2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Credit Card	l Purchases	
		-r y		

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 13 of 14

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
Total claims	6a.	Domestic support obligations	6a.	\$	0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	20,732.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	20,732.00
	6f.	Student loans	6f.	•	Total Claim
Total claims	01.	Student loans	oi.	\$	219,506.16
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	129,920.33
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	349,426.49

Fill in this inform					
Debtor 1	Todd R. Hall				
	First Name	Middle Name	Last Name		
Debtor 2	Kathleen N. Hall				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA		
Case number (if known)					Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.5	·				
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in this	information to identify your	case:		
Debtor 1	Todd R. Hall			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	Kathleen N. Hall	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA	
Case num	ber			
(if known)				☐ Check if this is an
				amended filing
Officia	l Form 106H			
Sched	lule H: Your Cod	lebtors		12/15
fill it out, a your name	and number the entries in the and case number (if known	e boxes on the left. Attac). Answer every question	h the Additional Page t n.	ion. If more space is needed, copy the Additional Page, o this page. On the top of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.
■ No				
☐ Yes	S			
Arizon No.	hin the last 8 years, have yo na, California, Idaho, Louisiana . Go to line 3. s. Did your spouse, former spo	ı, Nevada, New Mexico, Pັເ	uerto Rico, Texas, Wash	y? (Community property states and territories include ington, and Wisconsin.)
in line Form	2 again as a codebtor only	if that person is a guarar	ntor or cosigner. Make	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and 2	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			_
	City	State	ZIP Code	
3.2				Schedule D, line
	Name			Schedule E/F, line
				☐ Schedule G, line
	Number Street	Stata	ZID Codo	_
	City	State	ZIP Code	

Schedule H: Your Codebtors

Fill in this informa	tion to identify your case:	
Debtor 1	Todd R. Hall	
Debtor 2 (Spouse, if filing)	Kathleen N. Hall	
United States Bar	nkruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA	
Case number		Check if this is:
(If known)		An amended filing
		☐ A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	<u>rm 106l</u>	MM / DD/ YYYY
Schedule	I: Your Income	12/1:
Re as complete a	nd accurate as nossible. If two married people are filing together (Deb	tor 1 and Debtor 2) both are equally responsible for

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Part 1: Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Correctional Officer** Mediator Include part-time, seasonal, or **Federal Mediator & Reconciliation** self-employed work. **Dauphin County Prison Employer's name** Occupation may include student or homemaker, if it applies. **Employer's address** 501 Mall Road 4999 Louise Drive, Ste 302 Harrisburg, PA 17111 Mechanicsburg, PA 17055 How long employed there? 27 Years 4 Months

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 5,400.00 9,485.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 3. 1,000.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 6,400.00 9,485.00

Official Form 106I Schedule I: Your Income page 1

Case number (if known)

				For	Debtor 1		Debtor 2 or filing spouse	
	Сору	y line 4 here	4.	\$	6,400.00	\$	9,485.00	
	,			· —	0,100.00	· —	0,100.00	-
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,400.00	\$	2,279.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	420.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	109.00	\$	76.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	940.00	\$	253.00	_
	5e.	Insurance	5e.	\$	245.00	\$	597.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	67.00	\$	0.00	<u>-</u>
	5h.	Other deductions. Specify: FSA	5h.+	\$	100.00	⊦\$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	3,281.00	\$	3,205.00	-
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,119.00	\$	6,280.00	
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	: 8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	=
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify: Federal Income Tax Adj.	8h.+	\$	175.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	175.00	\$	0.00	
10	Calci	ulate monthly income. Add line 7 + line 9.	10. \$		3,294.00 + \$	6.2	80.00 = \$	9,574.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	· · · · · ·		,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	0,2		3,37 4.00
11.	State Include other	e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not	depend				chedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset hat amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$	9,574.00
							Combir	ned y income
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?				monding	,
		Yes. Explain:						
	ш	100. Explain.						

Fill	in this informa	ation to identify yo	our case:						
Deb	tor 1	Todd R. Hall				Check	c if this is:		
	Debtor 2 Kathleen N. Hall Spouse, if filing)					 ☐ An amended filing ☐ A supplement showing postpetition chapter 13 expenses as of the following date: 			
``	,	. 6 . 6 . 1	MIDDL	E DIOTRIOT OF DENINOV		_			
Unit	ed States Bank	ruptcy Court for the	: MIDDL	E DISTRICT OF PENNSY	LVANIA	l v	MM / DD / YYYY		
1	e number nown)								
		orm 106J							
		J: Your						12/15	
info	rmation. If m		eded, atta	. If two married people and the control of the cont					
Par		ribe Your House	ehold						
1.	Is this a join								
	□ No. Go to		in a conor	ate household?					
			ın a separ	ate nousenoid?					
	■ N □ Y	-	st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of Debto	or 2.		
2.	Do vou hav	e dependents?	□ No	•	·				
	Do not list D Debtor 2.	-	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?	
	Do not state	the						□ No	
	dependents	names.			Daughter		17	Yes	
								□ No □ Yes	
								□ No	
								☐ Yes	
								□ No	
3.	Do your exp	penses include	_	No				☐ Yes	
		f people other t d your depende	han _—	Yes					
exp	imate your ex	a date after the	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp					
Incl	ude expense	es paid for with	non-cash	government assistance i	f you know				
	value of suc icial Form 10		d have inc	cluded it on <i>Schedule I:</i> \	our Income		Your exp	enses	
4.		or home owners		ses for your residence. I or lot.	nclude first mortgage	e 4. \$		1,404.03	
	If not include	ded in line 4:							
	4a. Real	estate taxes				4a. \$		0.00	
	•	erty, homeowner's				4b. \$		0.00	
			•	upkeep expenses		4c. \$	-	360.00	
5.		eowner's associate mortgage payme		dominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00	

Official Form 106J Schedule J: Your Expenses page 1

Deb	tor 1 tor 2	Todd R. Hall	Coco num	har (if known)	
חפט	iOI Z	Kathleen N. Hall	Case num	ber (if known)	
6.	Utiliti	es:			
	6a.	Electricity, heat, natural gas	6a.	\$	420.00
	6b.	Water, sewer, garbage collection	6b.	\$	100.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	518.00
	6d.	Other. Specify: Pest Control	6d.	\$	114.00
7.	Food	and housekeeping supplies		\$	955.00
8.	Child	care and children's education costs	8.	\$	120.00
9.	Cloth	ing, laundry, and dry cleaning	9.	\$	413.00
10.		onal care products and services	10.	\$	185.00
11.	Medi	cal and dental expenses	11.	\$	100.00
12.	Trans	sportation. Include gas, maintenance, bus or train fare.			500.00
		t include car payments.	12.	\$	500.00
		tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	250.00
14.	Char	table contributions and religious donations	14.	\$	100.00
15.	Insur				
		of include insurance deducted from your pay or included in lines 4 or 20.	45-	Φ.	0.00
		Life insurance	15a.	*	0.00
		Health insurance	15b.	·	0.00
		Vehicle insurance	15c.	·	327.00
		Other insurance. Specify:	15d.	\$	0.00
16.		s. Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
17	Speci	llment or lease payments:		Φ	0.00
17.		Car payments for Vehicle 1	17a.	\$	652.00
		Car payments for Vehicle 2	17b.	*	0.00
		Other. Specify:	17c.	·	0.00
		Other. Specify:	17d.	·	0.00
18		payments of alimony, maintenance, and support that you did not report as		Ψ	0.00
10.		cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.		payments you make to support others who do not live with you.		\$	0.00
	Speci	fy:	19.		
20.	Othe	real property expenses not included in lines 4 or 5 of this form or on Sched	dule I: Yo	our Income.	
	20a.	Mortgages on other property	20a.	·	0.00
	20b.	Real estate taxes	20b.	\$	0.00
	20c.	Property, homeowner's, or renter's insurance	20c.		0.00
	20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeowner's association or condominium dues	20e.	\$	0.00
21.	Othe	: Specify: Misc., Haircuts, and Small Gifts	21.	+\$	150.00
22	Calar	ulata vaur manthly avnances			
22.		ulate your monthly expenses Add lines 4 through 21.		\$	6,668.03
		Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	0,008.03
	22c. /	Add line 22a and 22b. The result is your monthly expenses.		\$	6,668.03
23.	Calcu	ılate your monthly net income.			
		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	9,574.00
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	6,668.03
					<u> </u>
	23c.	Subtract your monthly expenses from your monthly income.		•	2 005 07
		The result is your <i>monthly net income</i> .	23c.	\$	2,905.97
24.	For ex modifi	ou expect an increase or decrease in your expenses within the year after you ample, do you expect to finish paying for your car loan within the year or do you expect your cation to the terms of your mortgage?			se or decrease because of a
	■ No				
	☐ Ye	s. Explain here:			

						1	
Fill in this inforr	mation to identify your	case:					
Debtor 1	Todd R. Hall						
	First Name	Middle Name	Las	t Name			
Debtor 2	Kathleen N. Hall						
(Spouse if, filing)	First Name	Middle Name	Las	t Name			
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLV	'ANIA			
Case number							
(if known)						☐ Check i amende	f this is an ed filing
Official Forn			Dabt	- ul -	Cabadulaa		
Declarat	cion About a	ın Individual	Dept	ors	Scheaules		12/15
ears, or both. 1	8 U.S.C. §§ 152, 1341, 1				result in fines up to \$250,0	••, •• ···· ·	
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help	you fi	II out bankruptcy forms?		
■ No							
☐ Yes. N	Name of person					nkruptcy Petition Pre n, and Signature (Of	
	ilty of perjury, I declare e true and correct.	that I have read the sum	mary and s	chedu	les filed with this declarat	ion and	
X /s/ Tod	ld R. Hall		Х	/s/ K	athleen N. Hall		
Todd F					leen N. Hall		
Signatu	re of Debtor 1			Signa	ture of Debtor 2		
Date _	May 21, 2019			Date	May 21, 2019		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Eu in	(h.i.a. i.a. f.a					
		nation to identify your	r case:			
Debtor	· 1	Todd R. Hall First Name	Middle Name	Last Name		
Debtor	2	Kathleen N. Hall				
(Spouse	if, filing)	First Name	Middle Name	Last Name		
United	States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF P	ENNSYLVANIA		
Case r	number _					Check if this is an mended filing
State Be as coinforma	ement complete a	and accurate as possi	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup y additional pages, write you	
Part 1:		Details About Your Ma r current marital statu	rital Status and Where You	Lived Before		
■ 2. Du ■	No	ast 3 years, have you	lived anywhere other than ived in the last 3 years. Do no	•	<i>i</i> .	
D	ebtor 1 Pr	ior Address:	Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2
	and territori No	es include Arizona, Ca		vada, New Mexico, Puerto R	ity property state or territory ico, Texas, Washington and W	
Part 2		n the Sources of You	,			
Fil	I in the tota ou are filir	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
■	No Yes. Fill	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$35,000.00	■ Wages, commissions, bonuses, tips	\$40,038.40
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calendar year: anuary 1 to December 31, 2018	■ Wages, commissions, bonuses, tips	\$77,000.00	■ Wages, commissions, bonuses, tips	\$110,000.00
		☐ Operating a business		☐ Operating a business	
	r the calendar year before tha anuary 1 to December 31, 2017		\$80,000.00	■ Wages, commissions, bonuses, tips	\$105,000.00
		☐ Operating a business		☐ Operating a business	
	and other public benefit payme winnings. If you are filing a join	whether that income is taxable. Exents; pensions; rental income; intent case and you have income that income from each source separa	rest; dividends; money collect you received together, list it o	ted from lawsuits; royalties; a only once under Debtor 1.	
		Debtor 1		Debtor 2	
		Sources of income	Gross income from each source	Sources of income Describe below.	Gross income (before deductions
		Describe below.	(before deductions and exclusions)	Besonibe Below.	and exclusions)
	r the calendar year before tha nuary 1 to December 31, 2017	t: Retirement Income	(before deductions and	becombe below.	•
		t: Retirement Income	(before deductions and exclusions)	Describe Bolow.	•
(Ja	rt 3: List Certain Payments Are either Debtor 1's or Debtor 1 individual primarily During the 90 days No. Go to I Yes List be paid the not ince * Subject to adjust Yes. Debtor 1 or Debtor During the 90 days No. Go to I Yes List be include	Cancellation of Debt You Made Before You Filed for tor 2's debts primarily consume for Debtor 2 has primarily consume for a personal, family, or household before you filed for bankruptcy, dine 7. Ilow each creditor to whom you parat creditor. Do not include payment lude payments to an attorney for ment on 4/01/22 and every 3 years or 2 or both have primarily consumers you filed for bankruptcy, directly and the second consumers of th	(before deductions and exclusions) \$4,600.00 \$799.00 Bankruptcy er debts? umer debts. Consumer debts old purpose." Idid you pay any creditor a total aid a total of \$6,825* or more in nts for domestic support oblig this bankruptcy case. rs after that for cases filed on umer debts. Idid you pay any creditor a total	s are defined in 11 U.S.C. § 1 I of \$6,825* or more? In one or more payments and ations, such as child support or after the date of adjustme I of \$600 or more?	and exclusions) 01(8) as "incurred by an the total amount you and alimony. Also, do nt.
(Ja Par	rt 3: List Certain Payments Are either Debtor 1's or Debtor 1 individual primarily During the 90 days No. Go to I Yes List be paid the not ince * Subject to adjust Yes. Debtor 1 or Debtor During the 90 days No. Go to I Yes List be include	Cancellation of Debt You Made Before You Filed for the 2's debts primarily consume for Debtor 2 has primarily consider a personal, family, or household before you filed for bankruptcy, doine 7. Iow each creditor to whom you parattereditor. Do not include payment lude payments to an attorney for ment on 4/01/22 and every 3 years are 2 or both have primarily consider you filed for bankruptcy, doine 7. Iow each creditor to whom you paragraph of the payments for domestic support of the payments bankruptcy case.	(before deductions and exclusions) \$4,600.00 \$799.00 Bankruptcy er debts? umer debts. Consumer debts old purpose." lid you pay any creditor a total aid a total of \$6,825* or more in the for domestic support oblighthis bankruptcy case. It is after that for cases filed on the umer debts. It is a total of \$600 or more and obligations, such as child supposed.	s are defined in 11 U.S.C. § 1 I of \$6,825* or more? In one or more payments and lations, such as child support or after the date of adjustme I of \$600 or more? If the total amount you paid the total amount you paid the total alimony. Also, do no	and exclusions) 01(8) as "incurred by an the total amount you and alimony. Also, do nt.

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Home Point Financial P.O. Box 790309 Saint Louis, MO 63179-0309	03/2019 - \$1,500.00 04/2019 - \$1,500.00 05/2019 - \$1,500.00	\$4,500.00	\$105,134.07	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
	Ford Credit P.O. Box 790119 Saint Louis, MO 63179-0119	03/2019 - \$652.00 04/2019 - \$652.00 05/2019 - \$652.00	\$1,956.00	\$1,403.01	☐ Mortgage ■ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
7.	Within 1 year before you filed for bankruptous include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any ger control, or owner of 20% of	neral partners; partners partners or more of their votin	erships of which yo g securities; and ar	u are a general partner; corporations ny managing agent, including one for
	Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment
			paid	still owe	
	Kim Parker 2561 Danielle Drive Dover, PA 17315	06/15/2018 - \$1,500.00 07/11/2018 - \$600.00 09/05/2018 - \$1,200.00 09/20/2018 - \$1,920.00 10/7/2018 - \$800.00	\$6,020.00	\$0.00	Personal Loan
8.	Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a debt that benefited an
	■ No				
	☐ Yes. List all payments to an insider				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures			
9.	Within 1 year before you filed for bankruptor List all such matters, including personal injury modifications, and contract disputes.				
	No				
	Yes. Fill in the details. Case title	Nature of the case	Court or agency		Status of the case
	Case number				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 otor 2	Todd R. Hall Kathleen N. Hall	Case numbe	「 (if known)	
10.		n 1 year before you filed for bankrup k all that apply and fill in the details belo	ccy, was any of your property repossessed, foreclose w.	d, garnished, attache	d, seized, or levied?
	_	No. Go to line 11. Yes. Fill in the information below.			
	Cred	litor Name and Address	Describe the Property	Date	Value of the
			Explain what happened		property
11.	accol	n 90 days before you filed for bankru unts or refuse to make a payment bed No Yes. Fill in the details.	ptcy, did any creditor, including a bank or financial ir ause you owed a debt?	stitution, set off any	amounts from your
	Cred	litor Name and Address	Describe the action the creditor took	Date action was taken	Amount
12.	court	n 1 year before you filed for bankrup -appointed receiver, a custodian, or a No Yes	cy, was any of your property in the possession of an another official?	assignee for the ben	efit of creditors, a
Par	t 5:	List Certain Gifts and Contributions			
13.	I	n 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	otcy, did you give any gifts with a total value of more	than \$600 per person	?
	per p	with a total value of more than \$600 person	Describe the gifts	Dates you gave the gifts	Value
		on to Whom You Gave the Gift and ress:			
14.		No .	otcy, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
		Yes. Fill in the details for each gift or consorted from contributions to charities that		Dates you	Value
	more	e than \$600 rity's Name ress (Number, Street, City, State and ZIP Code)	tal Describe what you contributed	contributed	value
Par	t 6:	List Certain Losses			
15.		n 1 year before you filed for bankrup mbling?	ccy or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
		No			
	_	Yes. Fill in the details.			
		the loss occurred	Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
	Gan		ISM ance claims on line 33 of <i>Schedule Arb. Property.</i>	2018	\$2,400.00

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 Todd R. Hall otor 2 Kathleen N. Hall	C	Case number (if known)	
Par	t 7: List Certain Payments or Transfers			
16.	Within 1 year before you filed for bankruptcy, of consulted about seeking bankruptcy or prepare Include any attorneys, bankruptcy petition prepare	ing a bankruptcy petition?		rty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any propertransferred	Perty Date payment or transfer was made	Amount of payment
	Harold Shepley & Associates, LLC 209 West Patriot Street Somerset, PA 15501	Credit Relief Fees	04/03/2017	\$2,680.00
	Law Offices of Craig A. Diehl 3464 Trindle Road Camp Hill, PA 17011	Attorney Fees	Janaury 2019	\$1,000.00
	CC Advising, Inc	Credit Counseling Course	11/25/2018	\$20.00
	promised to help you deal with your creditors of Do not include any payment or transfer that you lis No Yes. Fill in the details. Person Who Was Paid			Amount of
	Address	transferred	or transfer was made	payment
	Harold Shepley & Associates, LLC 209 West Patriot Street Somerset, PA 15501	Monthly Cash Payments	Monthly since 04/03/2017	\$13,400.00
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already list No Yes. Fill in the details.	ness or financial affairs? as security (such as the granting of a se		
	Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection No		elf-settled trust or similar device	of which you are a
	Yes. Fill in the details.	Decadation and color of the	who there of a was d	Data Tuessafassa
	Name of trust	Description and value of the prope	rty transferred	Date Transfer was made

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and Sto	rage Units			
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No						
	☐ Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 y cash, or other valuables?	year before you filed for	bankruptcy, an			itory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe tl	ne contents	Do you still have it?	
22.	Have you stored property in a storage unit o ■ No □ Yes. Fill in the details.	or place other than you	home within 1	year before	you filed for bankrupto	cy?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S State and ZIP Code)		Describe tl	ne contents	Do you still have it?	
Par 23.	dentify Property You Hold or Control Do you hold or control any property that so		ude any propert	v vou borro	owed from are storing t	for or hold in trust	
20.	for someone.		ado dily proport	, , ou boc	g .		
	Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the proj (Number, Street, City, S Code)		Describe tl	ne property	Value	
Par	t 10: Give Details About Environmental Info	ormation					
For	the purpose of Part 10, the following definition	ons apply:					
	Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of these	ne air, land, soil, surfac	e water, ground	• .			
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.						
	Hazardous material means anything an envi hazardous material, pollutant, contaminant,		as a hazardous	waste, haz	ardous substance, toxi	c substance,	
Rep	ort all notices, releases, and proceedings that	at you know about, reg	ardless of when	they occur	red.		
24.	Has any governmental unit notified you that	you may be liable or p	otentially liable	under or in	violation of an environ	mental law?	
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental un Address (Number, S ZIP Code)		Enviror know it	nmental law, if you	Date of notice	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

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	otor 1 Todd R. Hall Kathleen N. Hall		Case number (if known)								
25.	Have you notified any governmental unit of	of any release of hazardous material?									
	■ No □ Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice							
26.	Have you been a party in any judicial or ac	dministrative proceeding under any envir	onmental law? Include settlements	and orders.							
	■ No □ Yes. Fill in the details.										
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case							
Pai	t 11: Give Details About Your Business o	r Connections to Any Business									
27.	Within 4 years before you filed for bankrup	ptcy, did you own a business or have any	of the following connections to a	ny business?							
	<u> </u>	I in a trade, profession, or other activity,	_								
	☐ A member of a limited liability com	npany (LLC) or limited liability partnership	o (LLP)								
	☐ A partner in a partnership										
	☐ An officer, director, or managing executive of a corporation										
	☐ An owner of at least 5% of the voti	ing or equity securities of a corporation									
	No. None of the above applies. Go to	Part 12									
		ill in the details below for each business.									
	Business Name	Employer Identification numb	er								
	Business Name Address (Number, Street, City, State and ZIP Code) Describe the nature of the business Do not include Social Security number or ITIN. Name of accountant or bookkeeper Dates business existed										
28.	Vithin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial nstitutions, creditors, or other parties.										
	No										
	Yes. Fill in the details below. Name Address	Date Issued									
	(Number, Street, City, State and ZIP Code)										
Pai	t 12: Sign Below										
are with	ve read the answers on this Statement of F true and correct. I understand that making a bankruptcy case can result in fines up to .S.C. §§ 152, 1341, 1519, and 3571.	a false statement, concealing property, o	r obtaining money or property by f								
/s/	Todd R. Hall	/s/ Kathleen N. Hall									
	dd R. Hall	Kathleen N. Hall Signature of Debtor 2									
Dat	nature of Debtor 1 e May 21, 2019	Date May 21, 2019									
			Wines for Donders at Cofficial Form	407\2							
■ N □ Y		nent of Financial Affairs for Individuals Fi	lling for Bankruptey (Official Form	107)?							
	you pay or agree to pay someone who is n	ot an attorney to help you fill out bankrup	otcy forms?								
	es. Name of Person Attach the Banki		- '	_							
	al Form 107 State are Copyright (c) 1996-2019 Best Case, LLC - www.bestcase	ment of Financial Affairs for Individuals Filing	тог рапкгиртсу	page 7 Best Case Bankrupto							
JUILW	and dopyright (b) 1990-2019 best dase, LLO - www.bestdase	AOOM		Desi Case Dankiupic							

Case 1:19-bk-02186-HWV Doc 1 Filed 05/21/19 Entered 05/21/19 09:09:48 Desc Main Document Page 49 of 67

Fill in this information to identify your case:								
Debtor 1	Todd R. Hall							
Debtor 2 (Spouse, if filing)	Kathleen N. Hall							
United States E	Bankruptcy Court for the: Middle	District of Pennsylvania						
Case number (if known)								

Check as directed in lines 17 and 21:									
According to the calculations required by this Statement:									
☐ 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).									
 Disposable income is determined under 11 U.S.C. § 1325(b)(3). 									
☐ 3. The commitment period is 3 years.									
■ 4. The commitment period is 5 years.									
☐ Check if this is an amended filing									

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 8,400.00 9,485.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 1

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Best Case Bankruptcy

				Column A Debtor 1		Column B Debtor 2 o		
7.	Interest, dividends, and royalties			\$	0.00	\$	0.00	
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount received was a the Social Security Act. Instead, list it here:	benefit u	nder					
	For you\$	0.00						
	For your spouse\$	0.00						
9.	Pension or retirement income. Do not include any amount received the benefit under the Social Security Act.	nat was a		\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Specify the source at Do not include any benefits received under the Social Security Act or pareceived as a victim of a war crime, a crime against humanity, or international domestic terrorism. If necessary, list other sources on a separate page a total below.	ayments ational or						
			-	\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	. \$	0.00	
11.	Calculate your total average monthly income. Add lines 2 through 10 each column. Then add the total for Column A to the total for Column B.			8,400.00	+ \$_	9,485.00	= \$ 17,885.00	
							Total average monthly income	_
Part	2: Determine How to Measure Your Deductions from Income						,	
12.	Copy your total average monthly income from line 11.						\$ 17,885.00	
13.	Calculate the marital adjustment. Check one:							
	You are not married. Fill in 0 below.							
	You are married and your spouse is filing with you. Fill in 0 below.							
	You are married and your spouse is not filing with you.						_	
	Fill in the amount of the income listed in line 11, Column B, that wa dependents, such as payment of the spouse's tax liability or the sp	ouse's su	ıppor	t of someone	e other tl	han you or you	ur dependents.	
	Below, specify the basis for excluding this income and the amount adjustments on a separate page.	of income	e dev	oted to each	n purpos	e. If necessary	/, list additional	
	If this adjustment does not apply, enter 0 below.	9	·					
		4			_			
			- — S		_			
	Total	•		0.0	0 6	opy here=>	_ 0.00	
	Total					opy nere=>		-
14.	Your current monthly income. Subtract line 13 from line 12.						\$17,885.00	
15.	Calculate your current monthly income for the year. Follow these	steps:						
	15a. Copy line 14 here=>						\$17,885.00	
	Multiply line 15a by 12 (the number of months in a year).						x 12	
	15b. The result is your current monthly income for the year for this pa	art of the f	orm.				\$ 214,620.00	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debto Debto			d R. hleer	Hall I N. Hall			Case number (<i>if k</i> i	nown)		
16.	Calc	culate	the r	nedian family income that appl	ies to you.	Follow these s	teps:			
	16a	. Fill ii	n the s	state in which you live.		PA	_			
	16b.	. Fill i	n the r	number of people in your househo	old.	3				
	16c.			nedian family income for your sta					\$_	82,518.00
				st of applicable median income a s for this form. This list may also				rate		
17.	Hov	v do t	he lin	es compare?						
	17a.			te 15b is less than or equal to line U.S.C. § 1325(b)(3). Go to Part						
	17b.		13	te 15b is more than line 16c. On the 25(b)(3). Go to Part 3 and fill ou ur current monthly income from li	ıt Calculati	on of Your Dis				
Part	3:	Ca	lcula	te Your Commitment Period Un	der 11 U.S.	.C. § 1325(b)(4)			
18.	Сор	у уо	ır tota	al average monthly income fror	n line 11 .				\$	17,885.00
19.	 Deduct the marital adjustment if it applies. If you are married contend that calculating the commitment period under 11 U.S.C spouse's income, copy the amount from line 13. 		rried, your spou	use is not filing with you, and	d you					
	19a.	. If the	mari	al adjustment does not apply, fill	in 0 on line	19a.			-\$	0.00
	19b.	. Sub	tract I	ine 19a from line 18.					\$	17,885.00
20.	Cald	culate	your	current monthly income for th	e year. Fol	low these step	s:			
	20a	Cop	y line	19b					\$_	17,885.00
		Mult	iply by	12 (the number of months in a y	ear).					c 12
	20b.	. The	result	is your current monthly income for	or the year f	or this part of t	he form		\$_	214,620.00
	20c.	Сор	y the r	nedian family income for your sta	ate and size	of household f	rom line 16c		\$_	82,518.00
	21.	How	do th	ne lines compare?						
				20b is less than line 20c. Unless d is 3 years. Go to Part 4.	otherwise o	rdered by the c	court, on the top of page 1 o	of this form, che	ck box 3,	The commitment
		•		20b is more than or equal to line nitment period is 5 years. Go to F		otherwise orde	ered by the court, on the top	o of page 1 of th	nis form, cl	neck box 4, The

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Todd R. Hall Todd R. Hall

Signature of Debtor 1

Date May 21, 2019

MM / DD / YYYY

X /s/ Kathleen N. Hall Kathleen N. Hall

Signature of Debtor 2

Date May 21, 2019
MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Fill in this info	rmation to identify your case:			
Debtor 1	Todd R. Hall			
Debtor 2 (Spouse, if filing	Kathleen N. Hall			
United States	Bankruptcy Court for the: Middle District of Pennsylvania			
Case number (if known)		☐ Check if	f this is an amended	filing
Official Form 1 Chapter	_{22C-2} 13 Calculation of Your Disposable Inco	ome		04/19
	orm, you will need your completed copy of <i>Chapter 13 Statement of</i> eriod (Official Form 122C-1).	Your Current Monthly In	come and Calculatio	n of
space is neede	e and accurate as possible. If two married people are filing together, d, attach a separate sheet to this form, Include the line number to was, write your name and case number (if known).			
Part 1: Ca	culate Your Deductions from Your Income			
the questio	Revenue Service (IRS) issues National and Local Standards for cens in lines 6-15. To find the IRS standards, go online using the link smay also be available at the bankruptcy clerk's office.	•		
expenses if	xpense amounts set out in lines 6-15 regardless of your actual expense. hey are higher than the standards. Do not include any operating expense do not deduct any amounts that you subtracted from your spouse's income the standards.	es that you subtracted from	income in lines 5 and	
If your expe	ses differ from month to month, enter the average expense.			
Note: Line n	umbers 1-4 are not used in this form. These numbers apply to information	n required by a similar form	used in chapter 7 cas	es.
5. The nu	mber of people used in determining your deductions from income			
plus the	e number of people who could be claimed as exemptions on your federal number of any additional dependents whom you support. This number raber of people in your household.		3	
National St	ndards You must use the IRS National Standards to answer the	e questions in lines 6-7.		
	clothing, and other items: Using the number of people you entered in lings to the following and other items	ne 5 and the IRS National	\$	1,446.00

Chapter 13 Calculation of Your Disposable Income

Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are

higher than this IRS amount, you may deduct the additional amount on line 22.

Debtor 1 Todd R. Hall Kathleen N. Hall

Case number (if known)

Pec	ple v	who are under 65 years of age							
	7a.	Out-of-pocket health care allowance per person	\$	55					
	7b.	Number of people who are under 65	X	3	-				
	7c.	Subtotal. Multiply line 7a by line 7b.	\$	165.00	-	Copy here=>	\$	165.00	
Pec	ple v	who are 65 years of age or older							
	7d.	Out-of-pocket health care allowance per person	\$	114					
	7e.	Number of people who are 65 or older	Χ	0	-				
	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00	_	Copy here=>	\$	0.00	
	7g.	Total. Add line 7c and line 7f			\$16	65.00	Copy t	otal here=>	\$165.00
Loc	al St	randards You must use the IRS Local Standards t	o answe	er the questi	ons in lines	8-15.			
		on information from the IRS, the U.S. Trustee Pro atcy purposes into two parts:	gram ha	s divided t	he IRS Loc	al Standard	for housi	ng for	
	Hous	ing and utilities - Insurance and operating exper	ses						
	lous	ing and utilities - Mortgage or rent expenses							
	arate Hou	ver the questions in lines 8-9, use the U.S. Truste e instructions for this form. This chart may also busing and utilities - Insurance and operating expense dollar amount listed for your county for insurance	oe availa enses: (able at the l Using the nu	bankruptcy Imber of peo	clerk's offic	e.		627.00
9.		using and utilities - Mortgage or rent expenses:						_	
	9a.	Using the number of people you entered in line 5, listed for your county for mortgage or rent expense	unt		\$1	,132.00			
	9b.	Total average monthly payment for all mortgages a	and othe	r debts sec	ured by you	r home.			
		To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.							
		Name of the creditor		verage mo	nthly				
		Home Point Financial	\$	1,4	404.03				
						Сору			Repeat this amount
		9b. Total average monthly paymen	nt \$	1,4	404.03	here=> -\$		1,404.03	on line 33a.
	9c.	Net mortgage or rent expense.						\neg	
		Subtract line 9b (total average monthly payment) for rent expense). If this number is less than \$0, en		9a (mortga	ge	\$	0.00	Copy here=>	\$
10.	If yo	ou claim that the U.S. Trustee Program's divisior	of the I	IRS Local S	Standard fo	r housing is	incorrect	and	
		ects the calculation of your monthly expenses, fil							\$
	Ex	xplain why:							

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

ebtor 1 ebtor 2	Todd R. Hall Kathleen N. Hall		Case number (if known)
11.	Local transportation expenses: Check the number of vehic	cles for which you claim	n an ownership or operating expense.
	☐ 0. Go to line 14.		
	☐ 1. Go to line 12.		
	■ 2 or more. Go to line 12.		
12.	Vehicle operation expense: Using the IRS Local Standards operating expenses, fill in the <i>Operating Costs</i> that apply for		
13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.		
Ve	hicle 1 Describe Vehicle 1: 2013 Ford Explorer 165	5,000 miles Fair Cor	ndition
13a.	Ownership or leasing costs using IRS Local Standard		\$ 508.00
13b.	Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles.		
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mont bankruptcy. Then divide by 60.		at
	Name of each creditor for Vehicle 1	Average monthly payment	
	Ford Credit	\$\$	
	Total Average Monthly Payment	\$ 32.60	Copy Repeat this amount on line 33b.
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0), enter \$0	\$\$ Copy net Vehicle 1 expense here => \$\$ 475.40
Ve	hicle 2 Describe Vehicle 2:		
13d.	Ownership or leasing costs using IRS Local Standard		\$ <u>0.00</u>
13e.	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	. Do not include costs fo	or
	Name of each creditor for Vehicle 2	Average monthly payment	
	-NONE-	\$	
	Total average monthly payment	\$0.00	Copy Repeat this amount on line 33c.
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$0), enter \$0	\$ 0.00 Copy net Vehicle 2 expense here
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of v		
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in word claim more than the IRS Local Standard for <i>Public Trans</i>	hat you believe is the a	

Chapter 13 Calculation of Your Disposable Income

		n addition to the expense dhe following IRS categories	for				
16.	Taxes: The total monthly am self-employment taxes, social your pay for these taxes. Ho and subtract that number fro Do not include real estate, sa	\$	4,245.69				
17.	Involuntary deductions: Th						
	contributions, union dues, ar	\$	495.00				
10		. , ,	•	•	01(k) contributions or payroll savings. e insurance. If two married people are	–	
10.	filing together, include payme Do not include premiums for of life insurance other than to	\$	239.00				
19.	Court-ordered payments:				by the order of a court or		
	administrative agency, such				Vou will list those obligations in line 25	\$	0.00
20				• • •	You will list these obligations in line 35.	Ψ	
20.	■ as a condition for your job		educatio	n that is either	required:		
			h abild if	مرام مالماريم	ation is available for similar continue	\$	0.00
	, , , ,	, , ,			ation is available for similar services.	Ψ	
21.	Do not include payments for			•	sitting, daycare, nursery, and preschool.	\$	0.00
22.		and welfare of you or your	depend	lents and that i	amount that you pay for health care s not reimbursed by insurance or paid al entered in line 7.		
	Payments for health insuran	ce or health savings accour	nts shou	ld be listed onl	y in line 25.	\$	0.00
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.						
	24. Add all of the expenses allowed under the IRS expense allowances.						
24.		owed under the IRS expe	nse allo	wances.		\$	8,167.09
	Add lines 6 through 23. litional Expense Deductions	These are additional d	eductior	ns allowed by t		\$	8,167.09
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability	These are additional d Note: Do not include a	eductior ny expe	ns allowed by the nse allowances			8,167.09
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance, disability insurance.	These are additional d Note: Do not include a	eductior ny expe	ns allowed by the nse allowances	s listed in lines 6-24. ses. The monthly expenses for health		8,167.09
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance, your dependents.	These are additional d Note: Do not include a	eductior ny expe avings a ounts tha	ns allowed by the seal of the	s listed in lines 6-24. ses. The monthly expenses for health		8,167.09
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, vour dependents. Health insurance	These are additional d Note: Do not include a y insurance, and health sa ce, and health savings acco	eduction ny experimental experi	ns allowed by the nse allowance account experiment are reasonable 520.00	s listed in lines 6-24. ses. The monthly expenses for health		8,167.09
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance	These are additional d Note: Do not include a y insurance, and health sa ce, and health savings acco	eductior ny expe avings a unts tha \$ \$	ns allowed by the seal of the	s listed in lines 6-24. ses. The monthly expenses for health		8,167.09 695.00
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account	These are additional d Note: Do not include a insurance, and health sace, and health sace, and health sace, and health savings according to the sa	eductior ny expe avings a unts tha \$ \$	ns allowed by the seal of the	s listed in lines 6-24. ISSES. The monthly expenses for health only necessary for yourself, your spouse, or	r	
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to	These are additional d Note: Do not include a insurance, and health sace, and health sace, and health sace, and health savings according to the sa	eductior ny expe avings a unts tha \$ \$	ns allowed by the seal of the	s listed in lines 6-24. ISSES. The monthly expenses for health only necessary for yourself, your spouse, or	r	
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to No. How much do you yes Continued contributions to continue to pay for the reason	These are additional d Note: Do not include a v insurance, and health sace, and health sace, and health savings accordant amount? In actually spend? In the care of household of the care of household of the care and necessary care as of your immediate family wh	eduction ny expe avings a nunts that \$ \$ \$ \$ \$ \$ r family and suppo is una	ns allowed by the nse allowance: account experit are reasonable from 100.00 100.00 695.00 members. The port of an elded ble to pay for se	copy total here=> e actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	r	
25.	Add lines 6 through 23. Itional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to No. How much do you yes Continued contributions to continue to pay for the reason your household or member of include contributions to an are Protection against family wes	These are additional d Note: Do not include a v insurance, and health sace, and health sace, and health sace, and health savings according to the care of household of the care of household of the care of household of the care of your immediate family who count of a qualified ABLE prolence. The reasonably not included in the care of your immediate family who count of a qualified ABLE prolence. The reasonably not include a province of the care additional to the care of your immediate family who count of a qualified ABLE prolence. The reasonably not include a province of the care additional distributions are additional to the care of the care of household of the car	eduction ny experiments that the summer of t	ns allowed by the nse allowance of the second of the secon	copy total here=> e actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	r \$	695.00

Debtor 1 Debtor 2	Todd R. Hall Kathleen N. Hall	Case r	number (<i>if known</i>)		
28.	Additional home energy costs. Your home line 8.	e energy costs are included in your insurance a	and operating expenses on	l	
	If you believe that you have home energy co 8, then fill in the excess amount of home en	osts that are more than the home energy costs ergy costs	included in expenses on li	ne	
	You must give your case trustee documents amount claimed is reasonable and necessar	tion of your actual expenses, and you must shory.	ow that the additional	\$	0.00
		ren who are younger than 18. The monthly expendent children who are younger than 18 year		ſ	
	You must give your case trustee documenta claimed is reasonable and necessary and n	tion of your actual expenses, and you must ex ot already accounted for in lines 6-23.	plain why the amount		
	* Subject to adjustment on 4/01/22, and eve	ry 3 years after that for cases begun on or afte	r the date of adjustment.	\$	0.00
		ne monthly amount by which your actual food a allowances in the IRS National Standards. Thas in the IRS National Standards.			
		onal allowance, go online using the link specific obe available at the bankruptcy clerk's office.	ed in the separate		
	You must show that the additional amount of	laimed is reasonable and necessary.		\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable organical contributions.	amount that you will continue to contribute in thization. 11 U.S.C. § 548(d)(3) and (4).	he form of cash or financia	I	
	Do not include any amount more than 15%	of your gross monthly income.		\$	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	ons.		\$	695.00
Ded	uctions for Debt Payment				
	For debts that are secured by an interest i oans, and other secured debt, fill in lines	n property that you own, including home ma	ortgages, vehicle		
	To calculate the total average monthly paymed creditor in the 60 months after you file for bar	ent, add all amounts that are contractually due skruptcy. Then divide by 60.	to each secured		
	Mortgages on your home				erage monthly
33a.	Copy line 9b here		=>	\$	1,404.03
	Loans on your first two vehicles				
33b.	Copy line 13b here		=>	\$_	32.60
33c.	Copy line 13e here		=>	\$_	0.00
33d.	List other secured debts:				
Nam	ne of each creditor for other secured debt	Identify property that secures the debt Does payment include taxes or insurance?			
			■ No		
	Alerus Retirement and Benefits	401(k): Alerus 401(k)	☐ Yes	\$	626.76
		Theift Soving: Fodoral Covernment T	brift No	_	
	Thrift Savings Plan	Thrift Saving: Federal Government To Savings Plan	Yes	\$_	147.40
			□ No		
			☐ Yes	+\$_	
330	Total average monthly nayment, Add lines	33a through 33d \$	Cop total bar	al	2,210.79
33e	Total average monthly payment. Add lines	Soa unough sou	her	e=>	

Chapter 13 Calculation of Your Disposable Income

page 5

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Todd R. Hall Debtor 1 Kathleen N. Hall Debtor 2 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Monthly cure Total cure amount amount -NONE- $\div 60 = \$$ Copy total Total \$ 0.00 0.00 here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ☐ No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 20,732.00 ÷60 \$ 345.53 36. Projected monthly Chapter 13 plan payment 2.900.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by 6.40 the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total 185.60 185.60 here=> Average monthly administrative expense 2.741.92 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income**

38. Add all of the allowed deductions.

Copy line 24, All of the expenses allowed under IRS 8,167.09 expense allowances Copy line 32, All of the additional expense deductions Copy line 37, All of the deductions for debt payment 2,741.92

Total deductions.....

11,604.01

695.00

Copy total here=>

11,604.01

Todd R. Hall Debtor 1 Kathleen N. Hall Debtor 2 Case number (if known) Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) 39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 17.885.00 Statement of Your Current Monthly Income and Calculation of Commitment Period. 40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably 0.00 necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as 105.00 specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here => 11.604.01 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Describe the special circumstances Amount of expense 0.00 0.00 Total \$ here=> \$ Copy 44. **Total adjustments.** Add lines 40 through 43. 11.709.01 11,709.01 here=> -\$ 6,175.99 45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. Part 3: Change in Income or Expenses 46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

Form Line Reason for change Date of change Increase or Amount of change decrease? ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease □ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

Debtor 1 Debtor 2	Todd R. Hall Kathleen N. Hall		Case number (if known)				
Part 4:	Sign Below						
	By signing here, under penalty of perjury you /s/ Todd R. Hall Todd R. Hall Signature of Debtor 1		/s/ Kathleen N. Hall Kathleen N. Hall Signature of Debtor 2				
Date	May 21, 2019 MM / DD / YYYY	Date	May 21, 2019 MM / DD / YYYY				

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	•
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Middle District of Pennsylvania

In r	Todd R. Hall re Kathleen N. Hall		Case No				
	Katilleeli N. Hall	Debtor(s)	Chapter	13			
		~					
	DISCLOSURE OF COMPENS	SATION OF ATTOI	RNEY FOR D	EBTOR(S)			
l.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	4,000.00			
	Prior to the filing of this statement I have received		\$	1,000.00			
	Balance Due		Φ.	3,000.00			
2.	\$310.00 of the filing fee has been paid.						
3.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
1.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
5.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.						
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.						
5.	In return for the above-disclosed fee, I have agreed to rend	ler legal service for all aspect	s of the bankruptcy	case, including:			
	 a. Analysis of the debtor's financial situation, and rendering between the preparation and filing of any petition, schedules, statement of the debtor at the meeting of creditors described. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on house 	nent of affairs and plan which and confirmation hearing, are duce to market value; exe as as needed; preparation	n may be required; and any adjourned he emption planning	earings thereof;	d filing of		
7.	By agreement with the debtor(s), the above-disclosed fee d Representation of the debtors in any discl any other adversary proceeding.			ces, relief from s	tay actions or		
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	greement or arrangement for	payment to me for	representation of th	ne debtor(s) in		
ı	May 21, 2019	/s/ Craig A. Diehl	, Esquire				
_	Date	Craig A. Diehl, Es	squire				
		Signature of Attorne Law Offices of Ci					
		3464 Trindle Roa	d				
		Camp Hill, PA 17 (717) 763-7613 F		93			
		Name of law firm	un. (111) 100-02	~			

United States Bankruptcy Court Middle District of Pennsylvania

In re	Todd R. Hall Kathleen N. Hall		Case No.	
		Debtor(s)	Chapter	13
	VFI	RIFICATION OF CREDITOR	MATRIX	
	VEI	MITERITION OF EREDITOR	17171111121	
The ab	ove-named Debtors hereby verify	that the attached list of creditors is true and of	correct to the best	of their knowledge.
				C
Date:	May 21, 2019	/s/ Todd R. Hall		
		Todd R. Hall		
		Signature of Debtor		
Date:	May 21, 2019	/s/ Kathleen N. Hall		
		Kathleen N. Hall		

Signature of Debtor